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NOV 17 2010

DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE



**Water Resources Program**  
**Request for Determination of Water Budget Neutrality**

☐ SURFACE WATER      ☒ GROUND WATER

**Section 1. APPLICANT**

|  |                           |            |
|--|---------------------------|------------|
| Applicant/Business Name:<br>John Wilson and Launa Medved | Phone No:<br>910-692-5409 | Other No:  |
| Address: 480 Broadmeade Drive                            |                           |            |
| City: Southern Pines                                     | State: NC                 | Zip: 28387 |
| Email Address (optional): jwilson263@nc.rr.com           |                           |            |

|   |           |           |
|---|-----------|-----------|
| Contact Name (if different from above): | Phone No: | Other No: |
| Relationship to Applicant:              |           |           |
| Address:                                |           |           |
| City:                                   | State:    | Zip:      |
| Email Address (optional):               |           |           |

**Section 2. STATEMENT OF INTENT**

Briefly describe the purpose of your proposed project: Build one residence \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anticipated length of time to complete your project: Unknown -- 7 to 10 years \_\_\_\_\_

|                 |                                 |  |
|-----------------|---------------------------------|--|
| For Ecology Use | APPLICATION NO: 64-35435        | SEPA: Exempt/Not Exempt                              |
|                 | Fee Paid:  Check No: 11-17-2010 | ECY Coding: 001-001-WR1-0285-000011<br>WR139 KITTINS |



|   |  |
|---|--|
| Date Returned _____ By _____ Priority Date _____ By _____ WRIA: _____                                   |  |
| <b>Water Use:</b> List all proposed uses and the quantity required for each.<br>Domestic and Irrigation |  |
| <b>Purpose(s) of Use</b>  | <b>Rate (check one box only)</b><br><input type="checkbox"/> Cubic Feet per Second (CFS)<br><input checked="" type="checkbox"/> Gallons per Minute (GPM) |
| Domestic  | TBD  |
| Irrigation  | TBD  |
|   |  |
|   |  |
| <b>TOTAL:</b>   | TBD  |

| <b>Section 3. POINT OF DIVERSION OR WITHDRAWAL</b><br>Complete A or B, and C below   |          |    |             |   |       |          |
|--|----------|----|-------------|---|-------|----------|
| <b>A.) If Surface Water Source</b><br><br><input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake<br><input type="checkbox"/> Other: _____<br><br>Source Name: _____<br><br>Tributary to: _____<br><br>Number of proposed diversion points: _____<br><br>Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO |          |    |             | <b>B.) If Ground Water Source</b><br><br>Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br><input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____<br><br>Existing well diameter & depth: _____<br>If available, attach Water Well Report and pump test.<br>Well Tag ID No. _____<br>Number of proposed points of withdrawal: 1 |       |          |
| <b>C.) Point of Diversion/Withdrawal – Legal Description</b>   |          |    |             |   |       |          |
| Parcel No.   | ¼        | ¼  | Section     | Township  | Range | County   |
| 12077  |          | NW | 7           | 19N   | 15E   | Kittitas |
| Lot(s)   | Block(s) |    | Subdivision |   |       |          |
|  |          |    |             |   |       |          |

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

\_\_\_\_\_ Feet (☐ North/☐ South) and \_\_\_\_\_ feet (☐ East/☐ West)

from the (☐NW ☐SW ☐NE ☐SE ☐\_\_\_\_) corner of Section\_\_\_\_\_.

*NOTE: If more than one point of diversion/withdrawal, attach additional information on a separate sheet of paper.*



Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

#### Section 4. WATER SYSTEM INFORMATION

Complete A or B, C, D, E and F below

##### A.) Domestic Water Systems only

Projected number of connections to be served:  
One \_\_\_\_\_

Type of connections: Residential \_\_\_\_\_  
(e.g., home, recreational cabin)

##### B.) Municipal Water Systems only (defined under RCW 90.03.015)

Present population to be served water:  
\_\_\_\_\_

Estimate future population to be served:  
\_\_\_\_\_ (20 year projection)

##### C.) Water System Planning

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? ☐ YES ☒ NO

If yes, date plan was approved \_\_\_\_/\_\_\_\_/\_\_\_\_ Water System Number: \_\_\_\_\_

Name of water system: \_\_\_\_\_

Are you within the service area of an existing water system? ☐ YES ☒ NO

If yes, explain why you are unable to connect to the system: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

##### D.) On-Site Septic

Will there be an on-site septic system? ☒ YES ☐ NO

If yes, please provide a copy of the property covenant that restricts or prohibits trees or shrubs over the septic drain field.

##### E.) Sanitary Sewer System

Will domestic wastewater be discharged to a sanitary sewer system? ☐ YES ☒ NO

If yes, please provide a copy of the sewer utility agreement that serves the proposed project.

##### F.) Irrigation

Total number of acres requested to be irrigated under this application = 0.115 \_\_\_\_\_ Acres

NOTE: Outline the area to be irrigated on your attached map.



## Section 5. MITIGATION

To receive a new water right under Chapter 173-539A WAC, the applicant must identify an existing trust water right or pending application to place a water right in trust. The trust water right(s) must:

- Contribute an equal or greater amount to Yakima River flow during the irrigation season, as measured at Parker.
- Have a priority date earlier than May 10, 1905.
- Be eligible to be used for instream flow protection and mitigation of out-of-priority uses.

### A) Existing Trust Water Right

Please identify existing trust water right(s) for use as mitigation.

| Water Right No. | Rate (check one box only)  | Acre-Feet per Year (AF/YR) (If known) | Priority Date |
|-----------------|--|---------------------------------------|---------------|
|                 | <input checked="" type="checkbox"/> Cubic Feet per Second (CFS)<br><input type="checkbox"/> Gallons per Minute (GPM) |                                       |               |
| Claim No. 5259  | 0.5 cfs  | 57.5                                  | Oct 30, 1884  |
|                 |  |                                       |               |
| TOTAL:          |  | 57.5                                  |               |

### B) Proposed Trust Water Right Application

Please identify the pending application(s) to place a water right(s) into trust for use as mitigation.

| Water Right No. | Rate (check one box only)   | Acre-Feet per Year (AF/YR) (If known) | Priority Date |
|-----------------|---|---------------------------------------|---------------|
|                 | <input type="checkbox"/> Cubic Feet per Second (CFS)<br><input type="checkbox"/> Gallons per Minute (GPM) |                                       |               |
|                 |   |                                       |               |
|                 |   |                                       |               |
| TOTAL:          |   |                                       |               |

## Section 6. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

That portion of Parcel 12 of that certain Survey as recorded April 19, 2002, in Book 27 of Surveys, page 138, under Auditor's File No. 200204190017, records of Kittitas County, Washington; being a portion of the Northwest Quarter of Section 7, Township 19 North, Range 15 East, W.M., in the County of Kittitas, State of Washington, which lies North and West of the following described line;

Beginning at the Southeast corner of Parcel 3 of said survey; thence South 00°27'50" West, a distance of 150 feet; thence running North 89°14'57" West to the intersection of said line with the East boundary of Parcel 2 of said survey and the terminus of said line.



| ¼ | ¼  | Section | Twp. | Range | County   | Parcel No. |
|---|----|---------|------|-------|----------|------------|
|   | NW | 7       | 19N  | 15E   | Kittitas | 12077      |

## Section 7. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my request, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though employees of the Department of Ecology may have assisted me in the preparing this application, I am fully responsible for the accuracy of the information provided.

John W. Wilson Launa Medved *John W. Wilson* *Launa Medved* 11/9/2010  
 Print Name Signature Date  
 (Applicant or authorized representative)

John W. Wilson Launa Medved *John W. Wilson* *Launa Medved* 11/9/2010  
 Print Name Signature Date  
 (Land Owner, if seeking to use the ground water exemption)

Submit this form to:

DEPARTMENT OF ECOLOGY  
 WATER RESOURCES PROGRAM  
 CENTRAL REGIONAL OFFICE  
 15 W. YAKIMA AVE, SUITE 200  
 YAKIMA, WA 98902-3452